

Permit Application for operating mobile home/RV park

Mobile Home Park name: _____

Address of MH Park: _____

Clewiston, Florida 33440 Phone: _____

Mobile Home Park owner name: _____ Phone: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Mobile Home Park manager name: _____ Phone: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Park Information

City of Clewiston Local Business Tax Receipt #: _____

Total number of lots in park: Mobile home lots RV lots

Current number vacant: Mobile home lots RV lots

Must submit with application:

1. Copy of Hendry County Health Department permit for operating park
2. Site plan showing, but not limited to:
 - Lot number
 - Size of lot
 - Make & model of home (include year if available)
 - Tag number

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this topic will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating operation of mobile home parks.

Signature of Owner or Authorized Agent _____

(Date) _____

[illegible]